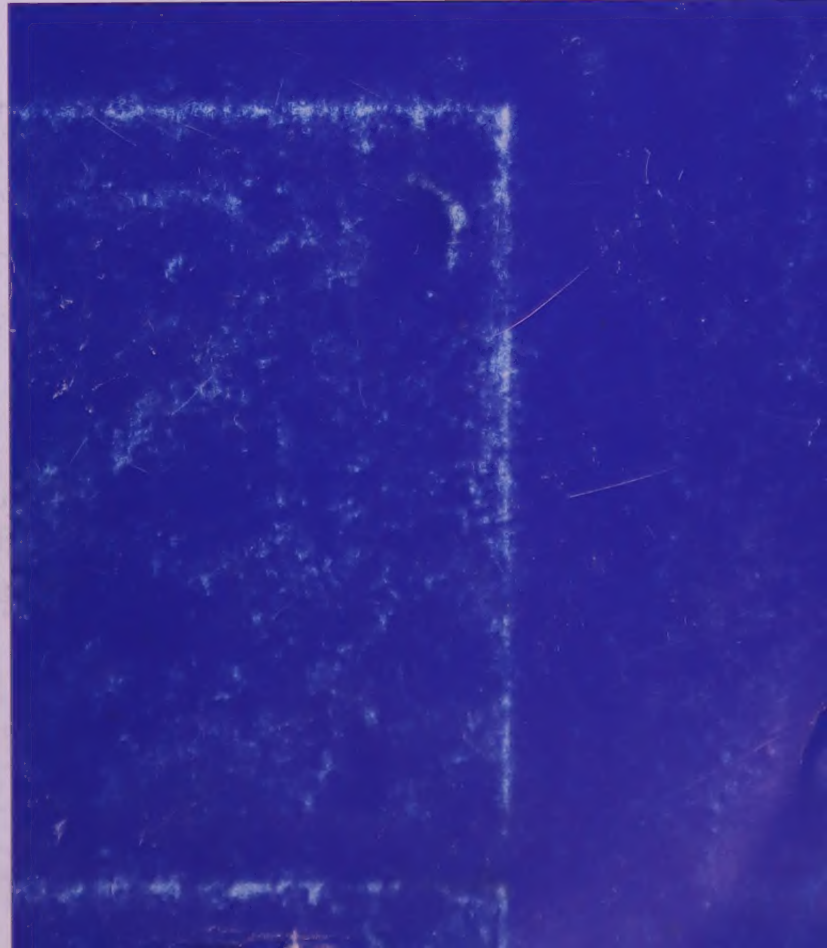


Chemotherapy & You



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Chemotherapy and you

A guide to self-help during treatment

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ABOUT THIS BOOKLET

This booklet will help you, your family, and your friends understand chemotherapy, the use of drugs to treat cancer. It will answer many of the questions you may have about this method of cancer treatment. It will also show you how you can help yourself during chemotherapy.

Taking care of yourself during chemotherapy is important in several reasons. For one thing, it can lessen some of the physical side effects you may have from your treatment. As you will see, some simple tips can make a big difference in how you feel. But the benefits of self-help are not just physical; they are psychological, too. Knowing some ways to take care of yourself can give your emotions a boost at a time when you may be feeling that much of what's happening to you is out of your control. This feeling can be easier to deal with when you discover how much you can contribute to your own well-being, in partnership with your doctors and nurses.

“Chemotherapy and You” will help you become an informed partner in your care. Remember, though, it is only a guide. Self-help is never substitute for professional medical care. Be sure to ask your doctor and nurse any questions you may have about chemotherapy, and tell them about any side effects you may have.



I. UNDERSTANDING CHEMOTHERAPY

a) What is chemotherapy?

Chemotherapy is the use of drugs to treat cancer. The drugs often are called “anticancer” drugs.

b) How does chemotherapy work?

Normal cells grow and die in a controlled way. But cancer occurs when cells become abnormal and keep dividing and forming more cells without control or order. Anticancer drugs destroy cancer cells by stopping them from growing or multiplying at one or more points in their life cycle. Because some drugs work either together or alone, chemotherapy often may consist of more than one drug. This is called combination chemotherapy.

In addition to chemotherapy, other methods sometimes are used to treat cancer. For example, your doctor may recommend that you have surgery to remove a tumor or to relieve certain symptoms that may be caused by your cancer. You also may receive radiation therapy to treat your cancer or its symptoms. Sometimes, as described below, your doctor may suggest a combination of chemotherapy, surgery, and/or radiation therapy.

Other types of drugs may be used to treat your cancer. These may include certain drugs that can block the effect of hormones. Doctors may also use biological therapy to boost the body’s natural defences against cancer.

c) What can chemotherapy achieve?

Depending on the type of cancer and its stage of development, chemotherapy can be used:

- To cure cancer.
- To keep the cancer from spreading.



- To slow the cancer's growth.
 - To kill cancer cells that may have spread to other parts of the body from the original tumor.
 - To relieve symptoms that may be caused by the cancer.
- Chemotherapy also can help people live more comfortably; this is known as palliative care.

d) Will chemotherapy be my only treatment for cancer?

Sometimes chemotherapy is the only therapy a patient receives. More often, however, chemotherapy is used in addition to surgery and/or radiation therapy; when it is used for this purpose it is called adjuvant therapy. There are several reasons why chemotherapy may be given in addition to other treatment methods. For instance, chemotherapy may be used to shrink a tumor before surgery or radiation therapy. It also may be used after surgery and/or radiation therapy to help destroy any cancer cells that may remain.

e) Which drugs will I get?

Your doctor decides which drug or drugs will work best for you. The decision depends on what kind of cancer you have, where it is, the extent of its growth, how it is affecting your normal body functions, and your general health. Your doctor also may suggest that you join a clinical trial for chemotherapy, or you may want to bring up this option with your doctor. Clinical trials are carefully designed research studies that test promising new cancer treatments. Patients who take part in research may be the first to benefit from improved treatment methods. These patients also can make an important contribution to medical care because the results of the studies may help many people. Patients participate in clinical trials only if they choose to and are free to withdraw at any time.



f) Where will I get chemotherapy?

You may get your chemotherapy at home, in your doctor's office, in a clinic, in your hospital's outpatient department, or in a hospital. The choice of where you get chemotherapy depends on which drug or drugs you are getting, your hospital's policies and your doctor's preferences. When you first start chemotherapy, you may need to stay at the hospital for a short time so that your doctor can watch the medicine's effects closely and make any adjustments that are needed.

g) How often will I get chemotherapy and how long will I get it?

How often and for how long you get chemotherapy depends on the kind of cancer you have, the goals of the treatment, the drugs that are used, and how your body responds to them. You may get chemotherapy every day, every week, or every month. Chemotherapy is often given in on-and-off cycles that include rest periods so that your body has a chance to build healthy new cells and regain its strength. Your doctor should be able to estimate how long you will be getting chemotherapy.

Whatever schedule your doctor prescribes, it is very important to stay with it. Otherwise, the anticancer drugs might not have their desired effect. If you miss a treatment session or skip a dose of medication, contact your doctor for instructions about what to do.

Sometimes, your doctor may delay a treatment based on the results of certain blood tests. Your doctor will let you know what to do during this time and when it's okay to start your treatment sessions again.

h) How will I get chemotherapy?

Depending on the type of cancer you have and the drug or drugs you are getting, your chemotherapy may be given in one or more of the following ways:



● *Into a vein (intravenously, or IV). You will get the drug through a thin needle inserted into a vein, usually on your hand or lower arm. Another way to get IV chemotherapy is by means of a catheter, a thin tube that is placed into a large vein in your body and remains there as long as it is needed. This type of catheter is known as a central venous catheter. Sometimes, a central venous catheter is attached to a port, a small plastic or metal container placed surgically under the skin.*

● *By mouth (orally, or PO) in pill, capsule, or liquid form, you will swallow the drug, just as you do many other medications.*

● *Into a muscle (inframascularly, or IM), under the skin (subcutaneously, or SQ or SC), or directly into a cancerous area in the skin (intralesionally, or IL). You will get an injection with a needle.*

● *Topically the medication will be applied on to the skin. Chemotherapy also may be delivered to specific areas of the body using a catheter. Catheters may be placed into the spinal fluid, abdominal cavity, bladder, or liver. Your doctor or nurse may use specific terms when talking about certain types of catheter. For example, an intrathecal (IT) catheter is used to deliver drugs into the spinal fluid. Intracavitary (IC) catheters can be placed in the abdomen, pelvis, or chest.*

Two kinds of pumps-external and internal-may be used to control the rate of delivery of chemotherapy. External pumps remain outside of the body. Some are portable and allow a person to move around while the pump is in use. Other external pumps are not portable and may restrict activity. Internal pumps are placed surgically inside the body, usually right under the skin. They contain a small reservoir (storage area) that delivers the drugs into the catheter. Internal pumps allow people to go about most of their daily activities.



i) Does chemotherapy Hurt?

Getting chemotherapy by mouth, on the skin, or by injection generally feels the same as taking other medications by these methods. Having an IV usually feels like having blood drawn for a blood test. Some people feel a coolness or other unusual sensation in the area of the injection when the IV is started. Report these feeling to your doctor or nurse. Be sure that you also report any pain, burning, or discomfort that occurs during or after an IV treatment.

Many people have little or no trouble having the IV needle in their hand or lower arm. However, if a person has a hard time for any reason, or if it becomes difficult to insert the needle into a vein for each treatment, it may be possible to use a central venous catheter or port. This avoids repeated insertion of the needle into the vein.

Central venous catheters and ports cause no pain or discomfort if they are properly placed and cared for, although a person usually is aware that they are there. It is important to report any pain or discomfort with a catheter or port to your doctor or nurse.

j) Can I take other medicines

while I am getting chemotherapy?

Some medicines may interfere with the effects of your chemotherapy. That is why you should take a list of all your medications to your doctor before you start chemotherapy. Your list should include the name of each drug, how often you take it, the reason you take it and the dose. Remember to include over-the-counter drugs such as laxatives, cold pills, pain relievers and vitamins. Your doctor will tell you if you should stop taking any of these medications before you start chemotherapy. After your treatments begin, be sure to check with your doctor before taking any new medicines or stopping the ones you already are taking.



k) Will I be able to work during chemotherapy?

Most people are able to continue working while they are being treated with anticancer drugs. It may be possible to schedule your treatment late in the day or night before the weekend, so they interfere with work as little as possible.

l) How will I know if my chemotherapy is working?

Your doctor and nurse will use several methods to measure how well your treatment is working. You will have frequent physical exams, blood tests, scans, and X-rays. Don't hesitate to ask the doctor about the test results and what they show about your progress.

While tests and exam can tell a lot about how chemotherapy is working, side effects tell very little. (Side effect-such as nausea or hair loss-occur because chemotherapy harms some normal cells as well as cancer cells.) Some times people think that if they don't have side effects, the drugs are not working, or that, if they do have side effects, the drugs are not working well. But side effects vary so much from person to person and from drug to drug, that having them or not having them usually isn't a sign of the most common side effects of chemotherapy and gives you some hints for coping with them.



II. COPING WITH SIDE EFFECTS

If you have questions about side effects, you are not alone, before chemotherapy starts, most people are concerned about whether they will have side effects and if so, what they will be like. Once treatment begin, people who have side effects want to know the best ways to cope with this section will answer some of your questions.

If you are reading this section before you start chemotherapy, you may feel overwhelmed by the wide range of side effects it describes. But remember: Every person doesn't get every side effect, and some people get few, if any. In addition, the severity of side effects varies greatly from person. Whether you have a particular side effect and how severe it will be, depends on the kind of chemotherapy you get and how your body reacts.

Be sure to talk to your doctor and nurse about which side effects are most likely to occur with your chemotherapy, how long they might last, how serious they might be and when you should seek medical attention for them.

a) What causes side effects?

Because cancer cells grow and divide rapidly, anticancer drugs are made to kill fast-growing cells. But certain normal, healthy cells also multiply quickly and chemotherapy can affect these cells, too, when it does, side effect may result. The fast-growing, normal cells most likely to be affected are blood cells forming in the bone marrow and cells in the digestive tract, reproductive system and hair follicles, anticancer drug can also damage cells of the heart, kidney, bladder, lungs and nervous system. The most common side effects of chemotherapy include nausea and vomiting, hair loss and fatigue. Other common side effects include an increase chance of bleeding getting an infection or developing anaemia. These side effects result from changes in blood cells during chemotherapy.



b) How long do side effects last?

Most normal cells recover quickly when chemotherapy is over, so most side effects gradually disappear after treatment ends and the healthy cells have a chance to grow normally. The time it takes to get over some side effects and regain energy varies from person to person. How soon you will feel better depends on many factors, including your overall health and the kind of drugs you have been taking.

While many side effects go away fairly rapidly, certain ones may take months or years to disappear completely. Sometimes, the side effect can last a lifetime, as chemotherapy may cause permanent damage to the heart, lungs, kidneys, or reproductive organs. Certain types of chemotherapy occasionally may cause delayed effects, such as a second cancer, that show up many years later.

It is important to remember that many people have no long-term problems due to chemotherapy. It also is reassuring to know that doctors are making great progress in preventing some of chemotherapy's more serious side effect. For instance they are using many new drugs and techniques that increase chemotherapy's powerful effect on cancer cell while decreasing its harmful effect on the body's healthy cells.

The side effects of chemotherapy can be unpleasant, but they must be measured against treatment's ability to destroy cancer. People getting chemotherapy sometimes become discouraged about the length of time their treatment is taking or the side effect they are having. If that happens to you, talk to your doctor. It may be that your medication or the treatment schedule can be changed. Or your doctor may be able to suggest ways to reduce side effects or make them easier to tolerate. Remember though, your doctor will not wait for any problems you might have. On the pages that follow, you will find suggestions for dealing with some of the more common side effects of chemotherapy.



c) Nausea and Vomiting

Chemotherapy can cause nausea and vomiting by affecting the stomach, the area of the brain that control vomiting, or both. This reaction to chemotherapy varies from person to person and from drug to drug. For example, some people never vomit during or after a treatment. Their symptoms may start soon after a treatment or hours later. They may feel sick for a few hours or for about a day. Be sure to tell your doctor or nurse if you are very nauseated and/or have vomited for more than a day or if your nausea is so bad that you cannot even keep liquids down.

Nausea and vomiting can almost always be controlled or at least lessened. If you experience this side effect, your doctor can choose from a range of drugs known as antiemetics, which help curb nausea and vomiting. Different drugs work for different people and it may be necessary to use more than one drug to get relief. Don't give up. Let your doctor and nurse find the drug or drugs that work best for you.

You can also try the following ideas:

- Avoid big meals so your stomach won't feel too full. Eat small meals throughout the day, instead of one, two, or three large meals
- Drink liquids at least an hour before or after meal time, instead of with your meals.
- Eat and drink slowly.
- Stay away from sweet, fried, or fatty foods.
- Eat foods cold or at room temperature so you won't be bothered by strong smells.
- Chew your food well for easier digestion.
- If nausea is a problem in the morning, try eating dry foods like cereal or toast, before getting up. Don't try this if you have mouth or throat sores if you are troubled by a lack of saliva.



- *Drink cool, clear, unsweetened fruit juices, such as apple or grape juice, or light-colored sodas, such as ginger ale, that have lost their fizz.*
- *Suck on ice cubes, mints.*
- *Try to avoid odors that bother you, such as cooking smell, smoke, or perfume.*
- *Rest in a chair after eating, but don't lie flat for at least 2 hours after you have finished your meal.*
- *Wear loose-fitting clothes.*
- *Breathe deeply and slowly when you feel nauseated.*
- *Distract yourself by chatting with friends or family members, listening to music, or watching a movie or TV show.*
- *Use relaxation techniques.*
- *Avoid eating for at least a few hours before treatment if nausea usually occurs during chemotherapy.*

d) Hair Loss

Hair loss (alopecia) is a common side effect of chemotherapy, but it doesn't always happen. Your doctor can tell you whether hair loss is likely to occur with the drug or drugs you are taking. When hair loss does occur, the hair may become thinner or may fall out entirely. The hair usually grows back after the treatments are over. Some people even start to get their hair back while they are still having treatments, in some cases, hair may grow back in a different color or texture.

Hair loss can occur on all parts of the body, not just the head. Facial hair, arm and leg hair, underarm hair and pubic hair all may be affected.

Hair loss usually doesn't happen right away; more often, it being after a few treatment. At that point, hair may fall out gradually or in clumps. Any hair that is still growing may become dull and dry.



To care for your scalp and hair during chemotherapy;

- *Use mild shampoos.*
- *Use soft hair brushes.*
- *Use low heat when drying your hair.*
- *Don't dye your hair.*
- *Have your hair cut short. A shorter style will make your hair look thicker and fuller. It will also make hair loss easier to manage if it occurs.*
- *Use a sunscreen, sun block, hat, or scarf to protect your scalp from the sun if you lose a lot of hair on your head. Some people who lose all or most of their hair choose to wear turbans, scarves, caps, wigs, or hairpieces, others leave their head uncovered, still others switch back and forth, depending on whether they are in public or at home with friends and family members. There are no "right" or "wrong" choices, do whatever feels comfortable for you.*

Here are some tips if you choose to cover your head:

- *Get your wig or hairpiece before you lose a lot of hair. That way, you can match your natural color and current hair style if you wish. You may be able to buy a wig or hairpiece at a specialty shop just for cancer patients.*

Losing hair from your head, face, or body can be hard to accept. It's common and perfectly all right to feel angry or depressed about this loss. Talking about your feeling can help.

e) Fatigue/Anaemia

Chemotherapy can reduce the bone marrow's ability to make red blood cells, which carry oxygen to all parts of your body. When



there are too few red blood cells, body tissues don't get enough oxygen to do their work. This condition is called anaemia.

Anaemia can make you feel very weak and tired. Other symptoms of anaemia include dizziness, chills, or shortness of breath. Be sure to report any of these symptoms to your doctor.

Your doctor will check your blood cell count often during your treatment. If your red count falls too low, you may need a blood transfusion to increase the number of red blood cells in your body.

Here are some things you can do to help yourself feel better if you develop anaemia:

- *Get plenty of rest. Sleep more, eat right and take naps during the day if you can.*
- *Limit your activities: Do only the things that are most important to you.*
- *Don't be afraid to get help when you need it. Ask family and friend to pitch in with things like child care, shopping, housework, or driving.*
- *Eat a well balanced diet.*
- *When sitting or lying down, get up slowly. This will help prevent dizziness.*

f) Infections

Chemotherapy can make you more likely to get infections. This happens because most anticancer drugs affect the bone marrow and decrease its ability to produce white blood cells, the cells that fight many types of infections. An infection can begin in almost any part of your body including your mouth, skin, lungs, urinary tract, rectum and reproductive tract.



Your doctor will check your blood cell count often while you are getting chemotherapy. Your doctor also may add colony stimulating factors to your treatment to keep your blood count from getting too far below normal. In spite of these extra steps, however, your white blood cell count still may drop. If this happens, your doctor may postpone your next treatment or give you a lower dose of drugs for a while.

When your white count is lower than normal, it is very important to try to prevent infections by taking the following steps:

- *Wash your hands often during the day. Be sure to wash them extra well before you eat and before and after you use the bathroom.*
- *Clean your rectal area gently but thoroughly after each bowel movement. Ask your doctor or nurse for advice if the area becomes irritated or if you have haemorrhoids. Also, check with your doctor before using enemas or suppositories.*
- *Stay away from people who have disease you can catch, such as cold, flu, measles, or chickenpox. Also try to avoid crowds.*
- *Stay away from children who recently have received immunizations, such as vaccines for polio, measles, mumps and rubella (German Measles).*
- *Don't cut or tear the cuticles of your nails.*
- *Be careful not to cut or nick yourself when using scissors, needles, or knives.*
- *Use an electric shaver instead of a razor to prevent breaks or cuts in your skin.*
- *Use a short toothbrush that won't hurt your gums.*
- *Don't squeeze or scratch pimples.*
- *Take a warm (not hot) bath, shower, or sponge bath every day. Pat your skin dry using a light touch. Don't rub.*
- *Use lotion or oil to soften and heal your skin if it becomes dry and cracked.*



- Clean cuts and scrapes right away with warm water, soap, and an antiseptic.
- Wear protective gloves when gardening or cleaning up.
- Do not get any immunization shots without checking first with your doctor to see if it's all right.

Most infections come from the bacteria normally found on the skin and in the intestines and genital tract. In some cases, the cause of an infection may not be known. When your white blood cell count is low, your body may not be able to fight off infections. So, even if you take extra care, you still may get an infection.

Be alert to the signs that you might have an infection and check your body regularly for its signs, paying special attention to your eyes, nose, mouth, genital and rectal areas. The symptoms of infection include:

- Fever over 100 degrees F.
- Chills.
- Sweating.
- Loose bowels (this can also be a side effect of chemotherapy).
- A burning feeling when you urinate.
- A severe cough or sore throat.
- Unusual vaginal discharge or itching.
- Redness or swelling, especially around a wound, sore, pimple, or intravenous catheter sites. Report any sign of infection to your doctor right away. This is especially important when your white blood cell count is low. If you have fever, don't use aspirin, acetaminophen, or any other medicine to bring your temperature down without first checking with your doctor.



g) Blood clotting problem

Anticancer drugs can affect the bone marrow's ability to make platelets, the blood cells that help stop bleeding by making your blood clot. If your blood does not have enough platelets, you may bleed or bruise more easily than usual, even from a minor injury.

Be sure to let your doctor know if you have unexplained bruising, small red spot under the skin, reddish or pinkish urine, or black or bloody bowel movements. Also report any bleeding from your gums or nose. Your doctor will check your platelet count often while you are having chemotherapy. If your platelet count falls too low, the doctor may give you a transfusion to build up the count.

Here are some way to avoid problems if your platelet count is low:

- *Don't take any medicine without first checking with your doctor or nurse. This includes aspirin or aspirin free pain relievers, including acetaminophen, ibuprofen, and any other medicines you can buy without a prescription. These drugs may affect platelet function.*
- *Don't drink any alcoholic beverages unless your doctor says it's all right.*
- *Use a very soft toothbrush to clean your teeth.*
- *Clean your nose by blowing gently into a soft tissue.*
- *Take care not to cut or nick yourself when using scissors, needles, knives, or tools.*
- *Be careful not to burn yourself when ironing or cooking. Use a padded glove when you reach into the oven.*
- *Avoid contact sports and other activities that might result in injury.*

h) Mouth, Gum throat problems

Good oral care is important during cancer treatment. Anticancer



drugs can cause sores in the mouth and throat. They can also make these tissues dry and irritated or cause them to bleed. In addition to being painful, mouth sores can become infected by the many germs that live in the mouth. Because infections can be hard to fight during chemotherapy and can lead to serious problems, it's important to take every possible step to prevent them. Here are some suggestions for keeping your mouth, gums, and throat healthy:

- If possible, see your dentist before you start chemotherapy to have your teeth cleaned and to take care of any problem such as cavities, abscesses, gum disease, or poorly fitting dentures. Ask your dentist to show you the best ways to brush and floss your teeth during chemotherapy.
- Brush your teeth and gums after every meal. Use a soft toothbrush and a gentle touch, brushing too hard can damage soft mouth tissues. Ask your doctor, nurse, or dentist to suggest a special type of toothbrush and/or toothpaste if your gums are very sensitive.
- Rinse your toothbrush well after each use and store it in a dry place.
- Avoid commercial mouthwashes that contain a large amount of salt or alcohol. Ask your doctor or nurse about a mild mouthwash that you might use.

If you develop sores in your mouth, be sure to contact your doctor or nurse because you may need medical treatment for the sores. If the sores are painful or keep you away from eating, you also can try these ideas:

- Ask your doctor if there is anything you can apply directly to the sores. You also may ask your doctor to prescribe a medicine you can use to ease the pain.
- Eat foods cold or at room temperature. Hot and warm foods can irritate a tender mouth and throat.



- Avoid irritating, acidic food, such as tomatoes, citrus fruits and fruit juice (oranges, grapefruit and lemon) spicy or salty foods; and rough, coarse, or dry foods such as raw vegetables and toast.

If mouth dryness bothers you or makes it hard for you to eat, try these tips:

- Ask your doctor if you should use an artificial saliva product to moisten your mouth.
- Drink plenty of liquids
- Suck on ice cube or sugarless hard candy. You can also chew sugarless gum.
- Moisten dry foods with butter, margarine, gravy, sauces, or broth.
- Dunk crisp, dry foods in mild liquids.
- Eat soft and pureed foods like those listed above.
- Use lip balm if your lips become dry.

i) Diarrhoea

When Chemotherapy affects the cells lining, the intestine, the result can be diarrhoea (loose stools). If you have diarrhoea that continues for more than 24 hours, or if you have pain and cramping along with the diarrhoea, call your doctor. In several cases, the doctor may prescribe an antidiarrhoeal medicine. However you should not take any over-the-counter antidiarrhoeal medicines without asking your doctor first.

You can also try these ideas to help control diarrhoea:

- Eat smaller amounts of food, but eat more often.
- Avoid high-fiber foods, which can lead to diarrhoea and cramping. High-fiber foods include whole-grain breads and cereals, raw vegetables, beans, nuts, seeds, popcorn and fresh and dried fruit. Eat low-fiber foods, instead. Low-fiber foods include white bread,



white rice or noodles, creamed cereals, ripe bananas, canned or cooked fruit without skins, cottage cheese, yogurt, eggs, mashed or baked potatoes without the skin, pureed vegetables, chicken or without the skin and fish.

- Avoid coffee, tea, alcohol and sweets. Stay away from fried, greasy, or highly spiced foods, too. They are all irritating and can cause diarrhoea and cramping.

- Avoid milk and milk products if they make your diarrhoea worse.

- Unless your doctor has told you otherwise, eat more potassium rich foods because diarrhoea can cause you to lose this important mineral. Bananas, Oranges, Potatoes and Peach are good sources of potassium.

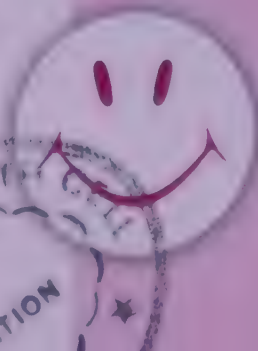
- Drink plenty of fluids to replace those you have lost through diarrhoea. Mild, clear liquids, such as apple juice, water, weak tea, clear broth, or ginger ale are best. Drink them slowly, and make sure they are at room temperature. Let carbonated drinks lose their fizz before you drink them.

- If your diarrhoea is severe, it is important to let your doctor know. Ask your doctor if you should try a clear liquid diet to give your bowels time to rest. As you feel better, you gradually can add the low-fiber foods listed above. A clear liquid diet doesn't provide all the nutrients you need, so don't follow one for more than 3 to 5 days.

- If your diarrhoea is very severe, you may need to get intravenous fluids to replace the water and nutrients you have lost.

j) Constipation

Some people who get chemotherapy become constipated because of the drugs they are taking. Others may become constipated because they are less active or less nourished than usual. Tell your doctor if you have not had a bowel movement for more than a day or two.



You may need to take a laxative or stool softener or use an enema, but don't use these remedies unless you have checked with your doctor, especially if your white blood cell counts are low.

You also can try these ideas to deal with constipation:

- *Drink plenty of fluids to help loosen the bowels, warm and hot fluids work especially well.*
- *Eat a lot of high-fiber foods. High-fiber foods include, whole-wheat bread and cereals, raw or cooked vegetables, fresh and dried fruit, nuts and popcorn.*
- *Get some exercise, simply getting out for a walk can help, as can a more structured exercise program. Be sure to check with your doctor before becoming more active.*

k) Nerve and Muscle Effects

Your nervous system affects just about all your body's organ and tissues. So it's not surprising that when chemotherapy affects the cells of the nervous system as the drugs sometimes do, a wide range of side effects can result. For example, certain drugs can cause peripheral neuropathy, a condition that may make you feel a tingling, burning, weakness, or numbness in the hands and/or feet. Other nerve-related symptoms include loss of balance, clumsiness, difficulty in picking up objects and buttoning clothing, walking problems, jaw pain, hearing loss, stomach pain, and constipation. In addition to affecting the nerves, certain anti cancer drugs also can affect the muscles and make them weak, tired, or sore.

In some cases, nerve and muscle effects-though annoying-may not be serious. In other cases, nerve and muscle symptoms may indicate serious problems that need medical attention. Be sure to report any suspected nerve or muscle symptoms to your doctor.

Caution and common sense can help you deal with nerve and muscle



problems. For example, if your fingers become numb, be very careful when grasping objects that are sharp, hot, or otherwise dangerous. If your sense of balance or muscle strength is affected, avoid falls by moving carefully, using handrails when going up down stairs and using bathmats in the bathtub or shower. Do not wear slippery shoes.

1) Effects on skin and nails.

You may have minor skin problems while you are having chemotherapy. Possible side effects include redness, itching, peeling, dryness and acne. Your nails may become brittle, darkened, or cracked. They also may develop vertical lines or bands.

You will be able to take care of most of these problems yourself. If you develop acne, try to keep your face clean and dry and use over-the-counter medicated creams or soaps. For itching apply cornstarch as you would a dusting powder. To help avoid dryness, take quick showers or sponge baths rather than long, hot baths, perfume, cologne, or aftershave lotion that contains alcohol. You can strengthen your nails with the remedies sold for this purpose, but be alert to signs of a worsening problem because these products can be irritating to some people. Protect your nails by wearing gloves when washing dishes, gardening, or performing other work around the house. Get further advice from your doctor if these skin and nail problem don't respond to your efforts. Be sure to let your doctor know if you have redness, pain, or changes around the cuticles.

Certain anticancer drugs, when given intravenously, may produce a fairly dramatic darkening of the skin all along the vein. Some people use make up to cover the area, but this can become difficult and time-consuming if several veins are affected, which sometimes happen. The darkened areas usually will fade on their own a few months after treatment ends.



Exposure to the sun may increase the effects some anticancer drugs have on your skin. Check with your doctor or nurse about using a sunscreen lotion with a skin protection factor of 15 to protect against the sun's effects. They may even suggest that you avoid being in direct sunlight or that you use a product, such as zinc oxide, that blocks the sun's rays completely. Long-sleeve cotton shirts, hats and pants also will block the sun.

Some people who have had radiation therapy develop "radiation recall" during their chemotherapy. During or shortly after anticancer drugs are given, the skin over the area that was treated with radiation turns red—a shade anywhere from light to very bright and may itch or burn. This reaction may last hours or even days. You can soothe the itching and burnings by putting a cool, wet compress over the affected area. Radiation recall reactions should be reported to your doctors or nurse.

Most skin problems are not serious, but a few demand immediate attention. For example, certain drugs given intravenously can cause serious and permanent tissue damage if they leak out of the vein. Tell your doctor or nurse right away if you feel any burning or pain when you are getting IV drugs. These symptoms don't always mean there's a problem but they always must be checked out at once.

You also should let your doctor or nurse know right away if you develop sudden or severe itching. If your skin breaks out in a rash or hives, or if you have wheezing or any other trouble breathing. These symptoms may mean you are having an allergic reaction that may need to be treated at once.

m) Kidney and bladder effects

Some anti cancer drugs can irritate the bladder or cause temporary or permanent damage to the kidneys. Be sure to ask your doctor if your anticancer drugs are among the ones that have this effect and



notify the doctors if you have any symptoms that might indicate a problem. Signs to watch for include:

- Pain or burning when you urinate.
- Frequent urination.
- A feeling that you must urinate right away (“urgency”)
- Reddish or bloody urine.
- Fever.
- Chills.

In general, it’s a good idea to drink plenty of fluids to ensure good urine flow and help prevent problems; this is especially important if your drugs are among those that affect the kidney and bladder. Water, Juice, Coffee, Tea, Soup, soft drinks, Ice cream, are all considered fluids. Your doctor will let you know if you must increase your fluid intake.

You also should be aware that some anticancer drugs cause the urine to change color (orange, red, or yellow) or to take on a strong or medicine-like odour. The color and odour of semen may be affected, as well. Check with your doctor to see if the drugs you are taking have this effect.

n) Flu-Like Syndrome.

Some people report feeling as though they have the flu a few hours to a few days after chemotherapy. Flu-like symptoms-muscle aches, headache, tiredness, nausea, slight fever, chills and poor appetite-may last from 1 to 3 days. These symptoms also can be caused by an infection or by the cancer itself, so it’s important to check with your doctor if you have flu-like symptoms.

o) Fluid Retention

Your body may retain fluid when you are having chemotherapy. This maybe due, to hormonal changes from your therapy, to the effects of the drugs themselves, or to your cancer, check with your



doctor or nurse if you notice swelling or puffiness in your face, hands, feet, or abdomen. You may need to avoid table salt and foods with a high sodium content. If the problem is severe, your doctor may prescribe diuretics, medicine to help your body get rid of excess fluids. However, don't take any over-the-counter diuretics without asking your doctor first.

p) Sexual effects : Physical and Psychological

Chemotherapy may-but does not always-affect sexual organs and functioning in both men and women. The side effects that might occur depend on the drugs used and the person's age and general health.

Men

Chemotherapy drugs may lower the number of sperm cells, reduce their ability to move, or cause other abnormalities. These changes can result in infertility, which may be temporary or permanent. Infertility affects a man's ability to father a child but does not affect his ability to have sexual intercourse.

Because permanent sterility may occur, it's important to discuss this issue with your doctor before you begin chemotherapy. If you wish, you might consider sperm banking, a procedure that freezes sperm for future use.

Men undergoing chemotherapy should use an effective means of birth control with their partners during treatment because of the harmful effect of the drugs on chromosomes. Ask your doctor when you can stop using birth control for this purpose.

Women

Anticancer drugs can damage the ovaries and reduce the amount of hormones they produce. As a result, some women find that their



menstrual periods become irregular or stop completely while they are having chemotherapy.

These hormonal effects of chemotherapy also may cause menopause-like symptoms such as hot flashes and itching, burning, or dryness of vaginal tissues. These tissue changes can make intercourse uncomfortable, but the symptoms often can be relieved by using a water-based vaginal lubricant.

The tissue changes also can make a woman more likely to get vaginal infections. To help prevent infection, avoid oil-based lubricants such as petroleum jelly, wear cotton underwear and pantyhose with a ventilated cotton lining. Your doctor also may prescribe a vaginal cream or suppository to reduce the chances of infection. If infections does occur, it should be treated right away.

Damage to the ovaries may result in infertility, the inability to become pregnant. In some cases, the infertility is a temporary condition; in other cases, it may be permanent. Whether infertility occurs and how long it lasts, depends on many factors, including the type of drug, the dosage given, and the woman's age.

Although pregnancy may be possible during chemotherapy, it still is not advisable because some anticancer drugs may cause, birth defects, doctors advise women of childbearing age-from the teens through the end of menopause-to use birth control throughout their treatment.

If a woman is pregnant when her cancer is discovered, it may be possible to delay chemotherapy until after the baby is born. For a woman who needs treatment sooner, the doctor may suggest starting chemotherapy after the 12th week of pregnancy, when the fetus is beyond the stage of greatest risk. In some cases, termination of the pregnancy may be considered.



Sexuality

Sexual feeling and attitudes vary among people during chemotherapy. Some people find that they feel closer than ever to their partners and have an increased desire for sexual activity. Others experience little or no change in their sexual desire and energy level. Still others find that their sexual interest declines because of the physical and emotional stresses of having cancer and getting chemotherapy. These stresses may include worries about changes in appearance; anxiety about health, family, or finances; or side effects, including fatigue and hormonal changes.

A partner's concerns or fears can also affect the sexual relationship. Some may worry that physical intimacy will harm the person who has cancer; other may fear that they might "catch" the cancer or be affected by the drugs. Many of these issues can be cleared up by talking about misunderstandings. Both you and your partner should feel free to discuss sexual concerns with your doctor, nurse, or other counselor who can give you the information and the reassurance you need.

If you were comfortable with and enjoyed sexual relations before starting therapy, chances are you will still find pleasure in physical intimacy during your treatment. You may discover, however, that intimacy takes on a new meaning and character. Hugging, touching, holding and cuddling may become more important, while sexual intercourse may become less important. Remember that what was true before you started chemotherapy remains true now: There is no one "right" way to express your sexuality. It's up to you and your partner to determine together what is pleasurable and satisfying to you both.



III. EATING WELL DURING CHEMOTHERAPY

It is very important to eat as well as you can while you are undergoing treatment. People who eat well can cope with side effects better and are able to fight infection more easily. In addition, their bodies can rebuild healthy tissues faster.

Eating well during chemotherapy means choosing a balanced diet that contains all the nutrients the body needs. A good way to do this is to eat foods from each of the following food groups: fruits and vegetables; poultry, fish and meat; cereals and breads; and dairy products. Eating well also means having a diet high enough in calories to keep your weight up and most important, high enough in protein to build and repair skin, hair, muscles and organs.

You may also need to drink extra amounts of fluid to protect your bladder and kidneys during your treatment.

a) What if I Don't feel like eating?

Even when you know it's important to eat well, there may be days when you feel you just can't. This may happen because side effects such as nausea or mouth and throat problems make it difficult or painful to eat. You also can lose your appetite if you feel depressed or tired. If this is the case, be sure to read the sections in this booklet on your particular discomforts. They will give you tips that can make it easier for you to eat.

When a poor appetite is the problem, try these hints:

- *Eat small meals or snacks whenever you want. You don't have to eat three regular meals each day.*



- *Vary your diet and try new foods and recipes.*
- *When possible, take a walk before meals; this makes you feel hungrier.*
- *Try changing your meal time routine. For example, eat by candlelight or in a different location.*
- *Eat with friends or family members. When eating alone, listen to the radio or watch TV.*
- *If you live alone, you might want to arrange for “Meals on wheels” or similar program to bring food to you.*

b) Can I drink alcoholic beverages?

Small amounts of alcohol can help you relax and increase your appetite. On the other hand, alcohol may interact with some drugs to reduce their effectiveness or worsen their side effect. For this reason, some people must drink less alcohol or avoid alcohol completely during chemotherapy. Be sure to ask your doctor if it's okay for you to drink beer, wine, or other alcoholic beverages.

c) Should I take Vitamins or Mineral supplements?

There is no single answer to this question, but one thing is clear; No diet or nutritional plan can “Cure” cancer, and taking vitamins and mineral supplements should never be considered a substitute for medical care. You should not take any supplements without your doctor's knowledge and consent.

d) Talking with your doctor and nurse.

Some people with cancer want to know every details about, their condition and their treatment. Other prefer only general information. The choice of how much information to seek is yours, but there are questions that every person getting chemotherapy should ask. These include:



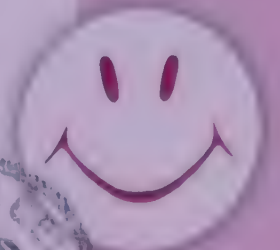
- *Why do I need chemotherapy?*
- *What are the benefits of chemotherapy?*
- *What are the risk of chemotherapy?*
- *What drug or drugs will I be taking?*
- *How will the drugs be given?*
- *Where will I get my treatments?*
- *How long will my treatment last?*
- *What are the possible side effects?*
- *Are there any side effect that I should report right away?*
- *Are there any other possible treatment methods for my type of cancer?*

This list is just a start. You always should feel free to ask your doctor, nurse and pharmacist as many questions as you want. If you don't understand their answers, keep asking until you do. Remember, when it comes to cancer and cancer treatment there is no such thing as a "stupid" question. To make sure you get all the answers you want, you may find it helpful to draw up a list of questions before your appointment. Some people even keep a "running list" and jot down each new question as it occurs to them.

To help remember your doctor's answers, you may want to take notes during your appointment. Don't feel shy about asking your doctor to slow down when you need more time to write. Another way to help you remember is to bring a friend or family member to sit with you while you talk to your doctor. This person can help you understand what your doctor says during your visit and help refresh your memory afterward.

e) Chemotherapy and your emotions

Chemotherapy can bring major changes to a person's life. It can affect overall health, threaten a sense of well-being, disrupt day-to-



day schedules and put a strain on personal relationships. No wonder, then, that many people feel fearful, anxious, angry, or depressed at some point during their chemotherapy.

These emotions are perfectly normal and understandable, but they also can be disturbing. Fortunately, there are ways to cope with these emotional “side effects,” just as there are ways to cope with the physical side effects of chemotherapy.

i) How can I get the support I need?

There are many sources of support you can draw on. Here are some of the most important:

Doctors and nurse: If you have questions or worries about your cancer treatment, talk with members of your health care team.

Counselling professionals: There are many kinds of counselors who can help you express, understand and cope with the emotions cancer treatment can cause. Depending on your preferences and needs, you might want to talk with a psychiatrist, psychologist, social worker, sex therapist, or member of the clergy.

Friends and family members: Talking with friend or family members can help you feel a lot better. Often, they can comfort and reassure you in ways that no one else can. You may find, though, that you’ll need to help them help you. At a time when you might expect that others will rush to your aid, you may have to make the first move.

Many people do not understand cancer and they may withdraw from you because they’re afraid of your illness. Others may worry that they will upset you by saying “the wrong thing”.

You can help relieve these fears by being open in talking with others about your illness, your treatment, your needs and your feelings. By talking openly, you can correct mistaken ideas about cancer. You can also let people know that there’s no single “right”



thing to say, so long as their caring comes through loud and clear. Once people know they can talk with you honestly, they may be more willing and able to open up and lend their support.

- **Support groups.** Support groups are made up of people who are going through the same kinds of experiences as you. Many people with cancer find they can share thoughts and feelings with group members that they don't feel comfortable sharing with anyone else. Support groups also can serve as an important source of practical information about living with cancer.

b) How can I relieve stress?

You can use a number of methods to cope with the stresses of cancer and its treatment. The techniques described here can help you relax. Try some of these methods to find the one (or ones) that work best for you. You may want to check with your doctor before using these techniques, especially if you have lung problems.

- **Muscle tension and release.** Lie down in a quiet room. Take a slow, deep breath. As you breathe in, tense a particular muscle or group of muscles. For example, you can squeeze your eyes shut, frown, clench your teeth, make a fist, or stiffen your arms or legs. Hold your breath and keep your muscles tense for a second or two. Then breathe out, release the tension and let your body relax completely. Repeat the process with another muscle or muscle group.

You also can try a variation of this method, called "progressive relaxation." Start with the toes of one foot and working upward, progressively tense and relax all the muscles of one leg. Next, do the same with the other leg. Then tense and relax the rest of the muscle groups in your body, including those in your scalp. Remember to hold your breath while tensing your muscles and to breathe out when releasing the tension.

- **Rhythmic breathing.** Get into a comfortable position and relax all your muscles. If you keep your eyes open, focus on a distant



object. If you close your eyes, imagine a peaceful scene or simply clear your mind and focus on your breathing.

Breathing in and out slowly and comfortably through your nose. If you like, you can keep the rhythm steady by saying to yourself, "In, one two; out, one two." Feel yourself relax and go limp each time you breathe out.

You can do this technique for just a few seconds or for up to 10 minutes. End your rhythmic breathing by counting slowly and silently to three.

Eventually, you will be able to control your relaxation responses without having to depend on feedback from the machine. Your doctor or nurse can refer you to someone trained in teaching biofeedback.

Imagery is a way of daydreaming that uses all your senses. It is usually done with your eyes closed. To begin, breathe slowly and feel yourself relax. Imagine a ball of healing energy-perhaps a white light forming somewhere in your body. When you can "see" the ball of energy, imagine that as you breathe in you can blow the ball to any part of the body where you feel pain, tension, or discomfort such as nausea. When you breathe out, picture the air moving the ball away from your body, taking with it any painful or uncomfortable feelings. (Be sure to breathe naturally, don't blow.) Continue to picture the ball moving toward you and away from you each time you breathe in and out. You may see the ball getting bigger and bigger as it takes away more and more tension and discomfort.

To end the imagery, count slowly to three, breathe in deeply, open your eyes, say to yourself, "I feel alert and relaxed."

If you choose to use imagery as a relaxation technique, please be sure to read the caution in the following section.



Visualization is a method that is similar to imagery. With visualization, you create an inner picture that represents your fight against cancer. Some people getting chemotherapy use images of rockets blasting away their cancer cells or of knights in armor battling their cancer cells. Others create an image of their white blood cells or their drugs attacking the cancer cells.

Visualization and imagery may help to relieve stress and to increase your sense of self control. But it is very important to remember that they can never take the place of the medical care your doctor prescribes to treat your cancer.

Hypnosis puts you in a trance like state that can reduce discomfort and anxiety. You can be hypnotized by a qualified person, or you can learn how to hypnotize yourself. If you are interested in learning more, ask your doctor or nurse to refer you to someone trained in the technique.

Distraction activity which takes your mind off your worries or discomforts. Try watching TV, listening to the radio, reading, going to the movies, or working with your hands by doing needlework or puzzles, building models, or painting. You may be surprised how comfortably the time passes.



GLOSSARY

This glossary review the meaning of some words used in “Chemotherapy and you” It also explains some words related to chemotherapy that are not mentioned in this booklet but that you may hear from your doctor or nurse.

Adjuvant therapy: *Anti cancer drugs or hormones given after surgery and/or radiation to help prevent the cancer from coming back.*

Alopecia: *Hair loss.*

Anaemia: *Having too few red blood cells. Symptoms of anaemia include feeling tired, weak and short of breath.*

Anorexia: *Poor appetite.*

Antiemetic: *A medicine that prevents or controls nausea and vomiting.*

Benign: *A term used to describe a tumor that is not cancerous.*

Biological therapy: *Treatment to stimulate or restore the ability of the immune system to fight infection and disease. Also called immunotherapy.*

Blood count: *The number of red blood cells, white blood cells, and platelets in a sample of blood. This is also called the complete blood count (CBC).*

Bone marrow: *The inner, spongy tissue of bones where red blood cells and white blood cells are formed.*

Cancer: *A general name for more than 100 diseases in which abnormal cells grow out of control; a malignant tumor.*

Catheter: *A thin flexible tube through which fluids can enter or leave the body.*

Central venous catheter: *A special thin, flexible tube placed in a large vein. It remains there for as long as it is needed to deliver and withdraw fluid.*



Chemotherapy: The use of drugs to treat cancer.

Colony-stimulating factors: Substances that stimulate the production of blood cells. Treatment with colony-stimulating factors (CSF) can help the blood-forming tissue recover from the effects of chemotherapy and radiation therapy. These include granulocyte colony-stimulating factors (G-CSF) and granulocyte-macrophage colony-stimulating factors (GM-CSF).

Combination chemotherapy: The use of more than one drug to treat cancer.

Diuretics: Drugs that help the body get rid of excess water and salt.

Gastrointestinal: Having to do with the digestive tract, which includes the mouth, esophagus, stomach and intestines.

Hormones: Natural substances released by an organ that can influence the function of other organs in the body.

Infusion: Slow and/or prolonged intravenous delivery of a drug or fluids.

Injection: Using a syringe and needle to push fluids or drugs into the body; often called a “shot”.

Intra-arterial (IA) : Into an artery.

Intracavitary (IC) : Into a cavity, or space, specifically the abdomen, pelvis, or the chest.

Intralesional (IL) : Into the cancerous area in the skin.

Intramuscular (IM) : Into a muscle.

Intrathecal (IT) : Into the spinal fluid

Intravenous (IV) : Into a vein

Malignant: Used to describe a cancerous tumor

Metastasis: When cancer cells break away from their original site and spread to other parts of the body.



Palliative care: Treatment to relieve, rather than cure, symptoms caused by cancer. Palliative care can help people live more comfortably.

Peripheral neuropathy: A condition of the nervous system that usually begins in the hand and/or feet with symptoms of numbness, tingling, burning and/or weakness. Can be caused by certain anticancer drugs.

Per os (PO) : By mouth, orally.

Platelets: Special blood cells that help stop bleeding.

Port: A small plastic or metal container surgically placed under the skin and attached to a central venous catheter inside the body. Blood and fluids can enter or leave the body through the port using a special needle.

Radiation therapy: Cancer treatment with radiation (high-energy rays)

Red blood cells: Cell that supply oxygen to tissues throughout the body.

Remission: The disappearance of signs and symptoms of disease.

Stomatitis: Sores on the inside lining of the mouth.

Subcutaneous (SQ or SC) : Under the skin.

Tumor: An abnormal growth of cells or tissues. Tumors may be benign (non-Cancerous) or malignant (cancerous).

White blood cells: The blood cells that fight infection.



V. SUMMARY OF PRECAUTIONS TO BE TAKEN DURING CHEMOTHERAPY

1. Care of Hair : Loss of hair is common side effect. To care for your scalp and hair during chemotherapy:

- Use mild shampoos.
- Use soft hair brush comb softly.
- Don't use brush rollers to set your hair.
- Don't dye your hair.
- Have your hair cut short. A shorter style will make your hair look thicker and fuller. It will also make hair loss easier to manage if it occurs.
- Use hat, or scarf to protect your scalp from the sun if you lose a lot of hair on your head.
- Get your wig before you lose a lot of hair. That way, you can match your natural colour and current hairstyle if you wish.

2. To prevent fatigue : Here are some things you can do to help yourself feel better if you develop anaemia:

- Get plenty of rest. Sleep more at night and take naps during the day if you can.
- Limit your activities: Do only the things that are most important to you.
- Don't be afraid to get help when you need it.
- Eat a well balanced diet.
- When sitting or lying down, get up slowly. This will help prevent dizziness.

3. Prevention of Infections : when your white blood cell count is lower than normal, you are prone to infections, it is very important



to try to prevent infections by taking the following steps:

- Wash your hands often during the day. Be sure to wash them extra well before you eat and before and after you use the bathroom.
- Clean your rectal area gently but thoroughly after going to toilet. Inform your doctor or nurse if the area becomes irritated or if you have haemorrhoids.
- Stay away from people who have diseases you can catch, such as a cold, the flu, measles, or chickenpox. Also avoid crowds.
- Stay away from children who recently have received immunizations, such as vaccines for polio, measles, mumps and rubella (German measles).
- Don't cut or tear the cuticles of your nails.
- Be careful not to cut or nick your self when using scissors, needles, or knives.
- Use a soft toothbrush that won't hurt your gums.
- Don't squeeze or scratch pimples.
- Take a warm (not hot) bath, shower, or sponge bath every day. Pat your skin dry using a light touch. Don't rub.
- Use lotion or oil to soften and heal your skin if it becomes dry and cracked.
- Clean cuts and scrapes right away with warm water, soap, and an antiseptic.

Most infections come from the bacteria normally found on the skin and in the intestines and genital tract. In some cases, the cause of an infections may not be known. When your white blood cell count is low, your body may not be able to fight off infections. So, even if you take extra care, you still may get an infection.



Warning signs:

Be alert to the signs that you might have an infection and check your body regularly for its signs, paying special attention to your eyes, nose, mouth and genital and rectal areas.

The symptoms of infection include:

- *Fever over 100 degrees F.*
- *Chills.*
- *Sweating.*
- *Loose bowels (this can also be a side effect of chemotherapy)*
- *A burning feeling when you urinate.*
- *A severe cough or sore throat.*
- *Unusual vaginal discharge or itching.*
- *Redness or swelling, especially around a wound, sore, pimple, or intravenous catheter sites.*
- *Report any signs or infection to your doctor right away. This is especially important when your white blood cell count is low.*

4. Bleeding: *you may have bleeding tendencies due to drop in platelet count. These precautions would help you:*

- *Don't take any medicine without first checking with your doctor or nurse.*
- *Don't drink any alcoholic beverages unless your doctor say it's all right.*
- *Use a very soft toothbrush to clean your teeth.*
- *Clean your nose by blowing gently into a soft tissue.*
- *Take care not to cut or nick when using scissors, needles, knives, or tools.*



- *Be careful not to burn yourself when ironing or cooking.*
- *Avoid contact sports and other activities that might result in injury.*

5. Care of mouth:

Good oral care is important during cancer treatment. Anticancer drugs can cause sores in the mouth and throat. They can also make these tissues dry and irritated or cause them to bleed. In addition to being painful, mouth sores can become infected by the many germs that live in the mouth. Because infections can be hard to fight during chemotherapy and can lead to serious problems, It's important to take every possible step to prevent them. Here are some suggestions for keeping your mouth, gums, and throat healthy.

- *If possible, see your dentist before you start chemotherapy to have your teeth cleaned and to take care of any problems such as cavities, abscesses, gum disease, or poorly fitting dentures. Chemotherapy can make you more likely to get cavities, so your dentist may suggest using a fluoride rinse or gel each day to help prevent tooth decay.*
- *Brush your teeth and gums after every meal. Use a soft toothbrush and a gentle touch; brushing too hard can damage soft mouth tissues.*
- *Rinse your toothbrush well after each use and store it in a dry place.*
- *Ask your doctor or nurse about mild mouthwash that you might use.*

6. Drink lots of fluids during and after chemotherapy

7. Ask your doctor or nurse to clarify any doubts.







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